

# INFORMATION BULLETIN

## WELFARE-TO-WORK

Number: WB98-9

Date: May 29, 1998

Expiration Date: 6/30/98  
69:53:se

TO: SERVICE DELIVERY AREA ADMINISTRATORS  
PRIVATE INDUSTRY COUNCIL CHAIRPERSONS  
MANAGEMENT INFORMATION SYSTEMS MANAGERS  
FINANCIAL MANAGERS  
JTPA PROGRAM OPERATORS  
JTPD STAFF

SUBJECT: INITIATION OF WTW FINANCIAL REPORTING—**IMMEDIATE ACTION  
REQUIRED**

The State is in the process of completing changes to the Job Training Automation (JTA) system which will allow Welfare-to-Work (WtW) subgrantees to request WtW cash on-line and report quarterly expenditures to the State. These changes are scheduled to be available by June 15, 1998. In order to ensure a smooth transition for our customers, we are requesting the completion and return of the following items:

1. Information Request Form—All SDAs—Attachment 1

Complete all appropriate sections and return. **Important: This is a confidential form. Do not fax. Mail only to the address stated on the form.**

Note: Sections 2 and 7. Please identify all authorized staff person(s) assigned to the WtW cash and/or expenditure reporting functions.

Please return the form promptly. We need to establish JTA logon identification (ID) for any new staff person(s). Be aware that the logon ID process takes **two weeks** from the date we receive your request, and staff will not be able to access the new system until this process has been completed.

2. Printer Request Form—Attachment 2

Please complete the appropriate section(s) and promptly return the form by **fax** to Shelly Evans, JTA Stateside Administrator, at fax number (916) 654-9586.

## JTA TIMESHARE USERS

### Section 1. Existing JTA Printers

Please list the JTA printer name(s) to be used by WtW financial staff. We are asking for this information in order to implement the ability to print WtW stateside reports.

### Section 2. New JTA Printers

If the WtW financial staff does not have a printer connected to JTA and they need one, complete Attachment 2 and return to the fax number on the form.

Important: Please be aware that adding new JTA printer connectivity takes a minimum of **6 to 8 weeks** to establish after the date we receive your request.

## JTA STANDALONES AND NON-JTA USERS

No changes are required for printing WtW stateside reports. No action is required at this time.

This is the first of several steps to implement the JTA WtW cash and expenditure reporting process. More information and instructions will be mailed to you shortly. If you have any questions concerning this request, please contact Shelly Evans with the JTA Customer Support Unit at (916) 654-8058. Thank you for your cooperation.

/S/ BILL BURKE  
Assistant Deputy Director

Attachments

JOB TRAINING AUTOMATION SYSTEM  
INFORMATION REQUEST FORM  
WELFARE TO WORK PROGRAM

To: Employment Development Department  
Fiscal Programs Division, MIC 70  
CASH CONTROL UNIT  
P. O. Box 826217  
Sacramento, CA 94230-6217  
Attention: Lynda Lawson

From: Subgrant Recipient: \_\_\_\_\_

Person responsible for Cash Request Security Password: \_\_\_\_\_

Mailing Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

1. The contact personnel who can answer questions regarding the cash request(s) is/are:

| Name  | Telephone Number |
|-------|------------------|
| _____ | ( ) _____        |
| _____ | ( ) _____        |
| _____ | ( ) _____        |

2. The names of personnel authorized to enter or request Welfare-to-Work (WtW) cash request(s) through the Job Training Automation (JTA) system from the state or by faxing to the Cash Desk (916) 654-7537 are as follows:

| Name  | Telephone Number | Signature required |
|-------|------------------|--------------------|
| _____ | ( ) _____        | _____              |
| _____ | ( ) _____        | _____              |
| _____ | ( ) _____        | _____              |

3. Please indicate the method of funding that you prefer to use by checking one of the below:

- a. ☐ Interbranch Deposit (See 4 and 7 next page) DEPOSIT SLIPS REQUIRED  
b. ☐ Wire Transfer (See 4 and 7 next page)  
c. ☐ U.S. Mail Delivery (See 5 and 7 next page)  
d. ☐ Direct Pickup (See 6 and 7 next page)

Interbranch Deposits are for any account with Bank of America.

4. For interbranch deposits or electronic wire transfers ("3.a." and "3.b." above), complete this section.

Please have all WtW funds related to the above subgrant deposited into the following bank account:

Bank Name: \_\_\_\_\_ Bank Telephone # ( ) \_\_\_\_\_

Address: \_\_\_\_\_

Bank Account Name: \_\_\_\_\_

Branch Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

5. For U.S. mail delivery of state warrants ("3.c." above), complete this section only if the address is different than that provided in the mailing address section. Please send all WtW-related warrants to the above subgrant to the following address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. For direct pickup of state warrants ("3.d" above), complete this section. Please release all WtW funds related to the above subgrant to the following person and/or alternate.

| Name  | Telephone Number<br>( ) | Signature |
|-------|-------------------------|-----------|
| _____ | _____                   | _____     |
| _____ | _____                   | _____     |

7. Person(s) authorized to enter expenditure reporting information into the JTA system:

| Name  | Telephone Number<br>( ) | Signature required |
|-------|-------------------------|--------------------|
| _____ | _____                   | _____              |
| _____ | _____                   | _____              |

8. Signature of Authorizing Representative:

\_\_\_\_\_ Date: \_\_\_\_\_

The Information Request Form is required for each office.

04/98 REV.

## Job Training Automation System Printer Connectivity Request

|                             |  |
|-----------------------------|--|
| Service Delivery Area Name: |  |
|-----------------------------|--|

Section 1:

Existing JTA Printer(s):

|               |  |
|---------------|--|
| Printer Name: |  |
| Printer Name: |  |

Section 2:

New JTA Printer Request Please supply this information for each printer requested:

|   |  |
|---|--|
| Printer Make/Model                              |  |
| Ethernet or Token Ring Port IP (router address) |  |
| Connectivity Option 3                           |  |
| JetDirect IP (machine address and name)         |  |

**Sample:**

|   |                                |
|---|--------------------------------|
| Printer Make/Model                              | HP LaserJet 3SI                |
| Ethernet or Token Ring Port IP (router address) | 133.122.144.333                |
| Connectivity Option 3                           | HP JetDirect-connected printer |
| JetDirect IP (machine address and name)         | 133.122.144.33 (jtpd3)         |

Please return this form by fax to:

Attn: Shelly Evans, JTA Stateside Administrator

FAX number (916) 654-9586